

INSTRUCTIONS: Budget Narrative for Program Applicants

Please type in black ink.

It will be easier to complete the budget narrative first, using the line items on the form as a guide, and then transfer the totals to the budget form. You should organize the budget narrative in the same order as the Budget Form and clearly identify requested Corporation Share and Grantee Share. Your grantee shares in specific items should meet at least the minimum requirements as described below.

You must complete the narrative for both funds requested from the Corporation and for other Federal/State/Local/Private funds. Show whether the grantee share is in-kind or in cash and whether the cash match comes from other federal vs. nonfederal funds. For each of the line items contained on the Budget Form, you must provide a full explanation in the budget narrative that explains the item, its purpose and shows how you calculated the cost, in an equation format where appropriate. For example, break travel down into discrete components, and then prepare equations showing the number of anticipated trips, the number of travelers, and the estimated cost.

Budget Item A - Member Support Costs

The narrative should clearly identify the number of members you are supporting by category (i.e. full time, half-time, reduced half-time, quarter time, minimum-time) and the amount of living allowance they will receive identifying Corporation share and your cash match share. There are limits on the Corporation share of member support costs. See member benefits. Indicate the source of the health insurance coverage and the number of members.

Budget Items B-E - Program Operating Cost

There are limits on the Corporation share of program operating costs. Do not include the living allowance, health care, and childcare costs in the calculation of the program operating costs. There are separate budget requirements for living allowance and health care.

Clearly identify the number of staff, position titles, annual salary, and the percentage of staff time that will apply to the grant. You must include a brief statement of responsibilities for each position.

You must individually list in the budget equipment with a unit acquisition value of \$5,000 or greater.

Our share of administrative costs cannot exceed 5% of total Corporation funds that you actually expend under this award. To arrive at our maximum share of 5%, multiply the sum of Subtotal A, plus Subtotal B through E in the Corporation share column by 5.26%. Your match for administrative costs may not exceed 10% of all direct cost expenditures. If you want to claim more than 10% match in administrative costs, you must have or obtain an approved indirect cost rate. Where appropriate, we will establish an indirect cost rate that you may use for this and other Federal awards. If you are using an indirect rate, you must clearly indicate which Federal agency approved the rate and period of time the approval covers.

You may provide your share of operating costs through cash or in-kind contributions. In-kind contributions are the value of goods or services you or a third party donate in support of the project. The share of funds may come from a number of sources, including federal. However, we also require that you raise some of the funds from the private sector, e.g. corporations, foundations, individuals, local businesses or nonprofit organizations.

Sources and Types of Match Contributions

At the end of the budget narrative, please include a chart that indicates the source and amount (or estimate) of match. An example follows:

Source	Amount in cash	In-Kind	Intended Purpose
Burger Palace	\$1,000	\$500 in food	In-kind will be donated food for service events. Cash will be used for supplies
City Foundation	Range: \$20,000-50,000		Cash will be used for salaries and supplies.
The Book Store		\$1,000 in books	Used for literacy program

Additional Resources

If you are providing any resources in excess of the required match, please provide a brief description of the amount and source.

Narrative Sample

A sample of a budget narrative for some of the cost categories follows:

	<u>Corporation Share</u>	<u>Grantee</u>	<u>Total</u>
Staff			
1 Program Director: 10% @ \$35,000 = \$3,500 (Overall project management)	\$3,000	\$500	\$3,500
2 Project Coordinators: 100% of time @ \$20,000 each = \$40,000 (Provides daily supervision to members, training, monitoring, progress reports)	\$34,000	\$6,000	\$40,000
Travel to State Commission Workshop			
2 staff x (2 days x \$120 per Diem) + mileage (150 miles x .25 mile) = \$517.50	\$317.50	\$200.00	\$517.50
Training for AmeriCorps members (ACMs)			
100 members x \$50 = \$5,000	\$3,500	\$2,000	\$5,000

Projected Budgets for Second and Third Program Year

If you are applying for the first year of the program, include projected budgets for years 2 and 3. If you are submitting information for the second program year, include a projected budget for year 3. You do not have to describe each line item of the projected budget, but you should indicate the line items that you expect to increase or decrease in future years.

INSTRUCTIONS: AmeriCorps Program Budget Form

Please type budget form or recreate comparable form on the computer.

The budget should be sufficient to perform the tasks described in the proposal narrative. Do not include unexplained amounts for miscellaneous or contingency costs or unallowable expenses such as entertainment costs. Round all figures to the nearest dollar.

Program Cycle

- Check the program cycle that corresponds with the year in which you submitted a new application to the Corporation. Give the program year within the program cycle that this budget will cover.

Original/Revised

- Use this budget form for the original and all revised budgets. At the beginning of each program year, you will submit an original budget for that program year. If necessary, you should mark subsequent budget revisions as such with the date of revision.
- You must attach a budget narrative to the budget form.

Legal Applicant/Program Name/Site Location

- From the title page, copy the name of the Legal Applicant (item 2) and name of the Program (item 4).
- Include the site location information only for national direct programs.

Box 1

- Column a identifies the range of hours members will serve in each term of service category. Within each category, all members should serve the same specified number of hours. Programs that operate summer programs can designate their summer members as Quarter-time or Minimum-time, depending on the number of hours served.
- In column b, indicate the number of members in each category who will receive a living allowance that uses Corporation funding.
- In column c, indicate the number of members in each category who will receive a living allowance from a source other than the Corporation or who will not receive any stipend. (All full-time members must receive a stipend).
- In column d, calculate the number of FTE (full-time equivalents) using the formulas listed in the box. At the bottom of column d, indicate the total number of FTE for the program by adding all numbers in column d.

You must match member support costs with non-Federal cash. The source may be state, private sector or other funds in accordance with applicable AmeriCorps requirements.

Item A Member Support Costs

- Copy the numbers from Box 1, column b to the "Number of Members" category.
- Calculating the Living Allowance. Generally, all full-time members must receive a living allowance between \$9,600 (minimum) and \$19,200 (maximum). You are not required to provide living allowances for any part-time members. We will fund up to 85% of the minimum living allowance amount shown on the following chart. If you want to provide a living allowance in excess of the minimum, you must provide a grantee match for all funds over the amount in the column titled "Maximum Federal Share of Living Allowance." For example, if you desire to provide a \$10,000 living allowance to your full-time members you would have to provide a \$1,840 match if you requested the maximum Corporation share of \$8,160. Programs in existence prior to September 21, 1993 (see section under What You Need to Know About Designing a Program for AmeriCorps Members— Member Benefits –Exceptions) may offer a lower living allowance to full-time members than the minimum, but Corporation funds will support only 85% of the total amount.

	# of hours ¹ Ed Award	FTE ²	Total Living Share of Living Allowance	Maximum Allowance ³	Maximum Federal Allowance ³
Full-Time	1700	\$4,725.00	1.000	\$19,200.00	\$8,160.00
One Year Half-Time	900	\$2,362.50	0.500	\$ 8,600.00	\$4,320.00
Two Year Half-Time	900	\$2,362.50	0.250	\$ 8,600.00	\$4,320.00 ⁴
Reduced Half -Time	675	\$1,800.00	0.375	\$ 7,200.00	\$3,240.00
Quarter-Time	450	\$1,250.00	0.250	\$ 4,800.00	\$2,160.00
Minimum-Time	300	\$1,000.00	0.200	\$ 3,360.00	\$1,440.00

- **FICA.** Unless specifically exempted by the IRS, all programs must pay FICA for any member receiving a living allowance, even when we do not supply the living allowance. In the first column next to FICA, indicate the number of members who will receive FICA. Calculate your share of FICA at 7.65% of the total amount of the living allowance and prorate in the same proportion as the Corporation and Grantee match.
- **Workers' Compensation.** Some states require workers' compensation for their AmeriCorps members. These rates vary by state. You must check with your State Department of Labor or state commission to determine if you are required to pay workers' compensation and at what level. If you are not required to pay workers' compensation you must obtain Occupational, Accidental, Death and Dismemberment coverage for members to cover in-service injury or incidents.
- **NOTE:** You must offer health care benefits to full-time members in accordance with Corporation requirements. Except as stated below you may not pay health care benefits to half-time members with Corporation funds. You may choose to provide health care benefits to half-time members from other sources (i.e., non-Corporation). Half-time members who are serving in a full-time capacity for a sustained period of time (such as a full-time summer project) may be eligible for health care benefits supported with our funds, subject to applicable match requirements. However, we must either approve this in the grant agreement or by prior written approval.
- **Health Insurance.** In the first column next to Health Insurance, indicate your number of members who will receive the program's existing Health Care benefits. If you have an existing health benefit policy for your full-time members that meets minimum requirements you may request 85% of those funds from us. You must match the remainder in cash, the Corporation will not pay for dependent coverage. Separate health insurance is not required for tribal AmeriCorps members covered by the Indian Health Service. Tribal programs may count \$924 per full-time member as match.
- **Other.** Include any other required member support costs here. Some states require unemployment coverage for their AmeriCorps members. Rates vary by each state. You cannot charge the cost of unemployment insurance taxes to the grant unless mandated by State law. You are responsible for determining what State law requires via your state commission, legal counsel, or applicable state agency. If state law requires unemployment coverage, include the cost in this line item. We will fund 85% of these expenses when mandated by state law.
- **Subtotal A.** Add each column to arrive at subtotal. Then calculate actual percentage for Corporation share and Grantee share by dividing each of these shares by the total.

You must match at least 33% of the total of items B-E below with cash or in-kind contributions. The sources may be Federal, state, private sector, or other funds in accordance with applicable AmeriCorps requirements.

Item B Other Member Support Costs

- In this section include any training, education, and other costs that relate directly to an AmeriCorps member or Leader.
- **Subtotal B.** Add each column to arrive at subtotal.

Item C Staff

- **Salaries.** Include the portion of staff costs that are attributed directly to the operation of an AmeriCorps program or project.
- **Benefits.** Include costs of fringe benefits for staff working on the AmeriCorps project.
- **Training.** Include the costs associated with training of staff working on the AmeriCorps project.

¹ Represents the minimum number of hours a member serves.

² Used to calculate cost/FTE and is fixed regardless of the number of hours served.

³ CNS share of living allowance is fixed for all positions regardless of hours served (this is current policy of FT and HT positions); programs have the option of adding more than 15% to increase member living allowance; programs are not required to provide living allowance to reduced part-time members.

⁴ One-half of living allowance is awarded in each of two years.

- **Other.** Include any other staff related costs. You may include costs for consultants related to the program operations. You should include consultants used for evaluation or administration related functions in Item E or Item F, respectively. Payments to individuals for consultant services under this grant may not exceed \$443 per day (exclusive of any indirect expenses, travel, supplies etc).
- **Subtotal C.** Add each column to arrive at subtotal.

Item D Operating Costs

- Include costs that are directly related to operating the AmeriCorps program. Examples follow.
- **Travel.** Costs associated with transportation, lodging, subsistence and other related expenses for staff and AmeriCorps members outside their local service site.
- **Corporation Sponsored Meeting.** If you are an Indian Tribe, U.S. Territory, or a program applying through the state commission, you should include up to \$2,000.00 in this line item to cover the cost of Corporation-sponsored technical assistance meetings. National Direct operating sites should include \$750.00 in this line item to cover these costs.
- **Supplies.** Include the funds for the purchase of supplies and materials, including Service Gear and equipment that does not fit the definition below. You must individually list any single item costing more than \$1,000.
- **Local Transportation.** Costs associated with traveling locally such as bus passes to local sites, mileage reimbursement for use of a car, etc.
- **Equipment.** Equipment is defined as tangible non-expendable personal property having a useful life of more than one year AND an acquisition cost of \$5,000 (five thousand) or more per unit (including accessories, attachments, and modifications). Include items that do not meet this definition in supplies above. Purchases of equipment are limited to 10% of the total grant amount (line items A-F).
- **Other.** Allowable costs in this section also may include space rental (for sites where programs are run; national office space rental may be unallowable), utilities, and telephone and Internet expenses that are directly and specifically used for AmeriCorps members and directly involve staff. If shared with other projects or activities, you must prorate the costs equitably. List each item and provide a justification in the budget narrative.

Item E Evaluation

- Include costs for program evaluation activities, including additional staff time you did not budget, use of evaluation consultants, purchase of instrumentation and other costs specifically for this activity. This does not include the daily/weekly gathering of data to assess progress toward objectives, but is a larger assessment of the impact your program is having on the community as well as an assessment of the overall systems and program design.

Item F Administration

- **Definitions.** Administrative costs means general or centralized expenses of overall administration of an organization that receives Corporation funds and does not include particular Program or project costs. For organizations that have an established indirect cost rate for Federal awards, administrative costs mean those costs that are included in the organization's indirect cost rate. Such costs are generally identified with the organization's overall operation and are further described in Office of Management and Budget Circulars A-21, A-87, and A-122. For organizations that do not have an established indirect cost rate for Federal awards, administrative costs include:
 - i. costs for financial, accounting, auditing, contracting or general legal services except in unusual cases where they are specifically approved in writing by the Corporation as program costs;
 - ii. costs for internal evaluation, including overall organization's management improvement costs (except for independent and internal evaluations of the Program or project evaluations that are specifically related to creative methods of quality improvement); and
 - iii. costs for general liability insurance that protects the organization(s) responsible for operating a Program or project, other than insurance costs solely attributable to the Program or project.

Administrative costs may also include that portion of salaries and benefits of the Program's director and other administrative staff not attributable to the time spent in support of a specific Program or project. The principles that pertain to the allocation and documentation of personnel costs are stated in the OMB circulars that are incorporated in Corporation regulations [45 CFR 2541.220(b)].

Administrative costs do not include the following allowable expenses directly related to a Program or project (including their operations and objectives), such as:

- i. allowable direct charges for members, including living allowances, insurance payments made on behalf of members, training and travel;
- ii. costs for staff (including salary, benefits, training and travel) who recruit, train, place or supervise members or who develop materials used in such activities, if the purpose is for a specific Program or project objective;

- iii. costs for independent evaluations and any internal evaluations of the Program or project that are related specifically to creative methods of quality improvement;
 - iv. costs, excluding those already covered in an organization's indirect cost rate, attributable to staff that work in a direct Program or project support, operational, or oversight capacity, including, but not limited to: support staff whose functions directly support Program or project activities; staff who coordinate and facilitate single or multi-site Program and project activities; and staff who review, disseminate and implement Corporation guidance and policies directly relating to a Program or project;
 - v. space, facility and communications costs that primarily support Program or project operations, excluding those costs that are already covered by an organization's indirect costs rate; and
 - vi. other allowable costs, excluding those costs that are already covered by an organization's indirect cost rate, specifically approved by the Corporation as directly attributable to a Program or project.
- **Limitation by statute.** The Corporation share of administrative costs cannot exceed 5% of total Corporation funds actually expended under this award. To arrive at the Corporation maximum share of 5%, multiple the sum of Subtotal A, plus Subtotal B through E in the Corporation share column by 5.26%
 - **Fixed 5%.** If approved on a case-by-case basis by the Corporation, the grantee may charge, for administrative costs, a fixed 5% of the total of the corporation funds expended. In order to charge this fixed 5%, the grantee match for administrative costs may not exceed 10% of all direct cost expenditures. These rates may be used without supporting documentation and are in lieu of an indirect cost rate.
 - **Indirect Cost Rates.**
 - i. If grantees have an approved indirect cost rate, such rate will constitute documentation of the grantee's administrative costs including the 5% maximum payable by the Corporation and the grantee match of administrative costs.
 - ii. If a grantee wants to claim more than 10% match in administrative costs it must have or obtain an approved indirect cost rate. Where appropriate, the Corporation will establish an indirect cost rate that may be used for this and other Federal awards.
 - **Consistency of treatment.** To be allowable under an award, costs must be consistent with policies and procedures that apply uniformly to both federally financed and other activities of the organization. Furthermore, the costs must be accorded consistent treatment in both federally financed and other activities as well as between activities supported by different sources of federal funds.

To calculate the maximum allowable Corporation share of administrative costs, multiply 5.26% by the sum of Corporation share subtotal A plus Corporation share subtotal B through E. This total is the maximum amount the applicant may request from the Corporation for this line item.

Item G Total Program Operating Costs

Add Items B through F for program operating costs.

Then calculate the actual percentage of match for the Corporation share and the Grantee share by dividing each of these shares by the total of Item G. The maximum Corporation share is limited to 67% of the total amount of Item G.

Item H Total Budget

Add Items A and G for total budget.

Corporation Cost per FTE

Enter the Total Corporation Share from Item H. Divide the total from Item H by the total number of FTEs from Box 1. Enter the result in the space for Corporation Cost per FTE.

BUDGET FORM

DRAFT
AMERICORPSProgram Cycle: ☐ 2000-03☐ 2001-04☐ 2002-05

Program Year: _____

☐ Original☐ Revised

Please attach the budget narrative to this page.

(Date of revision) _____

Legal Applicant Name: _____

Program Name: _____

Site Location (City, State, Zip): _____
(for National Direct programs Only)

BOX 1 AmeriCorps Member Positions Requested

	(a) Hours	(b) Corporation Living Allowance Provided	(c) No Corporation Living Allowance Provided	(d) Number of FTEs
Full Time	1700	_____	_____	b + c
One Year Half-Time	900	_____	_____	(b + c) x .5
Two Year Half-Time*	900	_____	_____	(b + c) x .25
Reduced Half-Time	675	_____	_____	(b + c) x .375
Quarter-Time	450	_____	_____	[(b + c) x .25]
Minimum-Time	300	_____	_____	[(b + c) x .200]

*If this line includes Continuing Half-time members from the previous grant cycle,
please check this box ☐ and identify how many: _____

TOTAL FTEs _____

A. Member Support Costs

	Number of Members	Corporation Share	Grantee Share	Total
1 Year FT	1700 hours	_____	_____	_____
1 Year HT	900 hours	_____	_____	_____
2 Year HT	900 hours	_____	_____	_____
Reduced HT	675 hours	_____	_____	_____
Quarter-Time	450 hours	_____	_____	_____
Minimum-Time	300 hours	_____	_____	_____
Subtotal		_____	_____	_____
(7.65%) FICA		_____	_____	_____
Workers' Compensation		_____	_____	_____
Health Insurance		_____	_____	_____
Other		_____	_____	_____
SUBTOTAL A.		Percentage: _____% (Maximum 85%)	Percentage: _____% (Minimum 15%)	_____ (Total 100%)

B. Other Member Support Costs

Training and Education	_____	_____	_____
Other (please specify in Budget Narrative)	_____	_____	_____
SUBTOTAL B.	_____	_____	_____

	Corporation Share	Grantee Share	Total
C. Staff			
Salaries	_____	_____	_____
Benefits	_____	_____	_____
Training	_____	_____	_____
Other (please specify in Budget Narrative)	_____	_____	_____
SUBTOTAL C.	_____	_____	_____

D. Other Operating Costs			
Travel	_____	_____	_____
Corporation sponsored training	_____	_____	_____
Supplies	_____	_____	_____
Local Transportation	_____	_____	_____
Equipment (not greater than 10% of A through F)	_____	_____	_____
Other (please specify in Budget Narrative)	_____	_____	_____
SUBTOTAL D.	_____	_____	_____

E. Evaluation	_____	_____	_____
SUBTOTAL E.	_____	_____	_____

F. Administration			
To arrive at the Corporation's maximum share of 5%, multiply the sum of Subtotal A plus Subtotal B through E in the Corporation Share column by .0526.			
Program/Operating Site	_____	_____	_____
State Commission (for State programs only)	_____	_____	_____
SUBTOTAL F.	_____	_____	_____

G. Total Program Operating Costs (B through F)			
	Percentage: _____ % (Maximum 67%)	Percentage: _____ % (Minimum 33%)	_____ (Total 100%)

H. Total Budget (A + G)	_____	_____	_____
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Corporation Cost per FTE (full-time equivalent position)

Total Corporation Share (Line H) _____

+

Divided by Total Number of FTEs (Box 1) _____ = _____ Corporation Cost per FTE

AMERICORPS PROGRAM OBJECTIVES SUMMARY FORM

Date of Submission _____

Please type. Please include each of the program objective summary statements from Box 6 of the AmeriCorps Objective Worksheets in the space below. Submit this form, not the worksheets, to the Corporation with your program application. If you have more than three objectives in any category, duplicate this form to record additional objectives.

Legal Applicant: _____ Program Cycle: ☐ 2000-03 ☐ 2001-04 ☐ 2002-05Site Location (City, State): _____
(for National Direct programs only)

Getting Things Done

1. _____

2. _____

3. _____

Member Development

1. _____

2. _____

3. _____

Strengthening Communities

1. _____

2. _____

3. _____

Instructions

By signing and submitting this application, as the duly authorized representative of the applicant, you certify that the applicant will comply with the Certifications and Assurances described below.

a) Inability to certify

Your inability to provide the certifications or assurances listed below will not necessarily result in denial of a grant. You must submit an explanation of why you cannot do so. We will consider your explanation in determining whether to enter into this transaction. However, your failure to furnish an explanation will disqualify your application.

b) Erroneous certification or assurance

The certifications and assurances are material representations of fact upon which we rely in determining whether to enter into this transaction. If we later determine that you knowingly submitted an erroneous certification or assurance, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

c) Notice of error in certification or assurance

You must provide immediate written notice to us if at any time you learn that a certification or assurance was erroneous when submitted or has become erroneous because of changed circumstances.

d) Definitions

The terms “covered transaction”, “debarred”, “suspended”, “ineligible”, “lower tier covered transaction”, “participant”, “person”, “primary covered transaction”, “principal”, “proposal”, and “voluntarily excluded” as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. An applicant shall be considered a “prospective primary participant in a covered transaction” as defined in the rules implementing Executive Order 12549. You may contact us for assistance in obtaining a copy of those regulations.

e) Certification requirement for subgrant agreements

You agree by submitting this proposal that if we approve your application you shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by us.

f) Certification inclusion in subgrant agreements

You agree by submitting this proposal that you will include the clause titled “Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transactions,” provided by us, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

g) Certification of subgrant principals

You may rely upon a certification of a prospective participant in a lower-tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless you know that the certification is erroneous. You may decide the method and frequency by which you determine the eligibility of your principals. You may, but are not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

h) Non-certification in subgrant agreements

If you knowingly enter into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

i) Prudent person standard

Nothing contained in the foregoing may be construed to require establishment of a system of records in order to render in good faith the certifications and assurances required. Your knowledge and information is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

CERTIFICATIONS

Certification – Debarment, Suspension, and Other Responsibility Matters

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 34 CFR Part 85, Section 85.510, *Participants' responsibilities*.

- A. As the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that neither the applicant nor its principals:
- Is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency.
 - Has, within a three-year period preceding this application, been convicted of, or had an adverse civil judgment entered in connection with, fraud or other criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.
 - Is presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state or local) with commission of any of the offenses enumerated in paragraph (1) (b) of this certification, and
 - Has not, within a three-year period preceding this application, had one or more public transactions (federal, state or local) terminated for cause or default;
- B. If you are unable to certify to any of the statements in this certification, you must attach an explanation to this application.

Certification – Drug-Free Workplace

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988, 34 CFR Part 85, Subpart F. The regulations require certification by grantees, prior to award, that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when the agency determines to award the grant. False certification or violation of the certification may be grounds for suspension of payments, suspension or termination of grants, or government-wide suspension or debarment (see 34 CFR Part 85, Section 85.615 and 85.620).

As the duly authorized representative of the grantee, I certify, to the best of my knowledge and belief, that the grantee will provide a drug-free workplace by:

- A. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- B. Establishing a drug-free awareness program to inform employees about—
- the dangers of drug abuse in the workplace,
 - the grantee's policy of maintaining a drug-free workplace.
 - any available drug counseling, rehabilitation, and employee assistance programs, and
 - the penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- C. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (A);
- D. Notifying the employee in the statement required by paragraph (A) that, as a condition of employment under the grant, the employee will:
- abide by the terms of the statement, and
 - notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction.
- E. Notifying us within ten days after receiving notice under subparagraph (D) from an employee or otherwise receiving actual notice of such conviction;

- F. Taking one of the following actions, within 30 days of receiving notice under subparagraph (D), with respect to any employee who is so convicted—
- Taking appropriate personnel action against such an employee, up to and including termination; or
 - Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a federal, state, or local health, law enforcement, or other appropriate agency;
- G. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (A) through (F).

Certification – Lobbying Activities

As required by Section 1352, Title 31 of the U.S. Code, as the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that:

- No federal appropriated funds have been paid or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer of Congress in connection with the awarding of any federal contract, the making of any federal loan, the entering into of any cooperative agreement, or modification of any federal contract, grant, loan, or cooperative agreement;
- If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the applicant will submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions;
- The applicant will require that the language of this certification be included in the award documents for all subcontracts at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients will certify and disclose accordingly.

ASSURANCES

As the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that the applicant:

- Has the legal authority to apply for federal assistance, and the institutional, managerial, and financial capability (including funds sufficient to pay the non-federal share of project costs) to ensure proper planning, management, and completion of the project described in this application.
- Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the state, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
- Will establish safeguards to prohibit employees from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 CFR 900, Subpart F).
- Will comply with all federal statutes relating to nondiscrimination. These include but are not limited to: Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color, or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686). which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the basis of disability (d) The Age Discrimination Act of 1975, as amended (42 U.S.C. 6101-6107), which prohibits discrimination on the basis of age; (e) The Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) The Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290dd-3 and 290ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the National and Community Service Act of 1990, as amended; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
- Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of federal participation in purchases.

- Will comply with the provisions of the Hatch Act (5 U.S.C. 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C 276a and 276a-77), the Copeland Act (40 U.S.C 276c and 18 U.S.C. 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333), regarding labor standards for Federally assisted construction sub-agreements.
- Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires the recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved state management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C 1451 et seq.); (f) conformity of federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
- Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).
- Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
- Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984, as amended, and OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations.
- Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, application guidelines, and policies governing this program.

CERTIFICATION AND ASSURANCES

CERTIFICATION SIGNATURE	NOTE: Sign this form and include in the application. Before you start: Before completing certification, please read the Certification Instructions.
SIGNATURE:	By signing this Certification page, you certify that you agree to perform all actions and support all intentions in the Certification sections of this application. The three Certifications are: <input type="radio"/> Certification: Debarment, Suspension and Other Responsibility Matters <input type="radio"/> Certification: Drug-Free Workplace <input type="radio"/> Certification: Lobbying Activities
Legal Applicant:	
Project Name:	
Name and Title of Authorized Representative:	
Signature:	
Date:	

ASSURANCE SIGNATURE	NOTE: Sign this form and include in the application.
SIGNATURE:	By signing this assurances page, you certify that you agree to perform all actions and support all intentions in the Assurances section.
Organization Name:	
Project Name:	
Name and Title of Authorized Representative:	
Signature:	
Date:	

APPLICATION CHECKLIST

Each copy of your application contains:

- ☐ **Table of Contents**
 - ☐ **Signed Title Page**
 - ☐ **Budget Form**
 - ☐ **Budget Narrative**
 - ☐ **Executive Summary: All applicants (no more than one page)**
 - ☐ **Program Narrative (no more than 20 pages)**
 - ☐ **Program Objectives Summary Form**
 - ☐ **AmeriCorps Leader Narrative (no more than six pages, if applicable)**
 - ☐ **Assurances and Certifications Form**
-
- ☐ **This application is double-spaced**
 - ☐ **This application is in 12-point font**
 - ☐ **This application consists of one unbound, single-sided original and two copies. All applicants are encouraged to voluntarily submit an additional four (4) copies of the application to expedite the review process.**